



Docket No. 1482/357

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re: Patent Application of
Olaf Vancura

Group Art Unit: 3713

Serial No.: 10/050,460

Examiner: O'Neill, Michael W.

Filed: January 15, 2002

For: METHOD AND APPARATUS FOR
SELECTING WILD SYMBOLS BY A
PLAYER (as amended)

Certificate of Mailing

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August 16, 2005
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Robert C. Dorr
Robert C. Dorr, Reg. No. 27,782

CORRECTED FORMAL DRAWING

Mail Stop Amendment
Commissioner of Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Dear Sir:

Please find enclosed 1 sheet of formal drawings (Figure 7) for the above-identified application correcting the informalities as required in Paper No./Mail Date 06162005.

Respectfully submitted,

DORR, CARSON, SLOAN, BIRNEY & KRAMER, P.C.

Date: 8/16/05

By: R. C. D.

Robert C. Dorr
Reg. No. 27,782
3010 East 6th Avenue
Denver, Colorado 80206
(303) 333-3010



AUG 16 2005

PTO/SB/21 (09-04)

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TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number	10/050,460
Filing Date	January 15, 2002
First Named Inventor	Olaf Vancura
Art Unit	3713
Examiner Name	O'Neill, Michael W.
Total Number of Pages in This Submission	20
Attorney Docket Number	1482/357

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fee Determination Record
<input type="text"/> Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Dorr, Carson, Sloan, Birney & Kramer, P.C.		
Signature			
Printed name	Robert C. Dorr		
Date	August 16, 2005	Reg. No.	27,782

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Robert C. Dorr - 27,782	Date	August 16, 2005

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